



3731
AB

PTO/SB/21 (modified)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Rev. 10/95

U.S. Department of Commerce
Patent and Trademark Office

TRANSMITTAL FORM

(to be used for all correspondence during pendency of
filed application)

		Application Number	10/033,614
		Filing Date	December 26, 2001
		First Named Inventor	Albert K. Chin
		Group Art Unit Number	3731
		Examiner Name	Not yet known
Total Number of Pages in This Submission	23	Attorney Docket Number	80121-06410

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Check Enclosed	<input type="checkbox"/> Letter to Chief Draftsperson
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Formal Drawing(s):
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> [] Sheet(s) of Figure(s) []
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO-1449	<input checked="" type="checkbox"/> Preliminary Amendment
<input type="checkbox"/> Copies of IDS Cited References	<input checked="" type="checkbox"/> Associate Power of Attorney
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Request for Correction of Recorded Assignment	
<input type="checkbox"/> Amendment/Response: [] Page(s)	
<input type="checkbox"/> After Final	
<input type="checkbox"/> Status Request	
<input type="checkbox"/> Revocation and Substitute Power of Attorney	

REMARKS:

SIGNATURE OF ATTORNEY OR AGENT

Signature:	<i>Albert C. Smith</i>	
Attorney/Reg. No.:	Albert C. Smith, Reg. No. 20,355	Dated: 1/16/03

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.

Signature:	<i>Albert C. Smith</i>	
Typed or Printed Name:	Albert C. Smith	Dated: 1/16/03
Express Mail Mailing Number (optional):		

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FEET TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 276)

Complete if Known	
Application Number	10/033,614
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Art Unit	3731
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number 19-2555

Deposit Account Name Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below
 Charge any additional fee(s) required under 37 CFR 1.16 – 1.21 or credit any overpayments to the deposit account.[†]
 Charge fee(s) indicated below, except for the filing fee to the deposit account.

A Duplicate Copy of this authorization is attached

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)		(\$.00)	
1251 110	2251 55	Extension for reply within first month [†]	
1252 410	2252 205	Extension for reply within second month [†]	
1253 930	2253 465	Extension for reply within third month [†]	
1254 1,450	2254 725	Extension for reply within fourth month [†]	
1255 1,970	2255 985	Extension for reply within fifth month [†]	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(g)	
1806 180	1806 180	Submission of Information Disclosure Statement	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) _____			

SUBTOTAL (2) (\$ 276)**SUBTOTAL (3)** (\$.00)

*or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

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TECHNOLOGY CENTER R3700
Fee Paid

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	43 -20** = 6	X 18 = 108	
Independent Claims	9 -3** = 2	X 84 = 168	
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	**Reissue independent claims over original patent
1205 18	2205 9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 276)**SUBTOTAL (3)** (\$.00)**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Albert C. Smith	Registration No. (Attorney/Agent)	20,355	Telephone (650) 335-7296
Signature	<i>Albert C. Smith</i>		Date	1/16/03